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APPLICATION NO	0. 1	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/735,477	· ·	12/11/2003	David C. Hovda	S-16	2479	
21394	7590	12/05/2006	•	EXAMINER		
		ORPORATION	TOY, ALEX B			
•	UEROS AV 'ALE, CA	94085-3523	ART UNIT	PAPER NUMBER		
,				3739		
			DATE MAILED: 12/05/2006			

Please find below and/or attached an Office communication concerning this application or proceeding.

			tion No.	Applicant(s)	Applicant(s)		
			477	HOVDA, DAVID	HOVDA, DAVID C.		
	Office Action Summary	Examine	er .	Art Unit			
		Alex B. T	oy	3739			
T	he MAILING DATE of this communicate eply	tion appears on th	ne cover sheet w	ith the correspondence a	ddress		
A SHOR' WHICHE - Extension after SIX (- If NO peri Failure to Any reply	TENED STATUTORY PERIOD FOR EVER IS LONGER, FROM THE MAIL soft ime may be available under the provisions of 3 (6) MONTHS from the mailing date of this communic od for reply is specified above, the maximum statuto reply within the set or extended period for reply will, received by the Office later than three months after the term adjustment. See 37 CFR 1.704(b).	LING DATE OF T 7 CFR 1.136(a). In no e sation. by period will apply and by statute, cause the ap	THIS COMMUNIO event, however, may a r will expire SIX (6) MON oplication to become AE	CATION. reply be timely filed NTHS from the mailing date of this of BANDONED (35 U.S.C. § 133).			
Status							
2a)	sponsive to communication(s) filed on is action is FINAL . 2b) ace this application is in condition for sed in accordance with the practice of	☑ This action is allowance excep	non-final. ot for formal matt	·	ne merits is		
Disposition	of Claims						
4a) 5)□ Cla 6)⊠ Cla 7)□ Cla	aim(s) 1-5,7,8,10,11,13-23,25 and 26 Of the above claim(s) is/are value is/are value is/are allowed. aim(s) 1-5,7,8,10,11,13-23,25 and 26 aim(s) is/are objected to. aim(s) are subject to restriction	withdrawn from co	onsideration.				
Application	Papers						
10)⊠ The App Re	e specification is objected to by the E drawing(s) filed on 11 December 20 plicant may not request that any objection placement drawing sheet(s) including the e oath or declaration is objected to by	003 is/are: a)⊠ and its the drawing(s) electronic requ	be held in abeyar ired if the drawing	nce. See 37 CFR 1.85(a). (s) is objected to. See 37 C	CFR 1.121(d).		
Priority und	er 35 U.S.C. § 119						
 12) Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f). a) All b) Some * c) None of: 1. Certified copies of the priority documents have been received. 2. Certified copies of the priority documents have been received in Application No. 3. Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)). * See the attached detailed Office action for a list of the certified copies not received. 							
Attachment(s)	References Cited (PTO-892)		4) 🔲 Interview (Summary (PTO-413)			
2) Notice of 3) Information	Draftsperson's Patent Drawing Review (PTO- on Disclosure Statement(s) (PTO-1449 or PTC (s)/Mail Date		Paper No(s	s)/Mail Date nformal Patent Application (PT	⁻ O-152)		

DETAILED ACTION

Response to Amendment

This Office Action is in response to applicant's Request for Continued

Examination filed on October 9, 2006. All previous prior art rejections are maintained.

Information Disclosure Statement

The listing of references in the specification is not a proper information disclosure statement. 37 CFR 1.98(b) requires a list of all patents, publications, or other information submitted for consideration by the Office, and MPEP § 609.04(a) states, "the list may not be incorporated into the specification but must be submitted in a separate paper." Therefore, unless the references have been cited by the examiner on form PTO-892, they have not been considered.

Claim Rejections - 35 USC § 112

The following is a quotation of the second paragraph of 35 U.S.C. 112:

The specification shall conclude with one or more claims particularly pointing out and distinctly claiming the subject matter which the applicant regards as his invention.

Claims 1-5, 7-8, 10-11, 13-23, and 25-26 are rejected under 35 U.S.C. 112, second paragraph, as being indefinite for failing to particularly point out and distinctly claim the subject matter which applicant regards as the invention.

Regarding independent claim 1, applicant recites "independently advancing at least one optic fiber into a nucleus of the disc through an access device". However, it is

unclear what the optic fiber is being independently advanced from. Since there is no relative reference point, the claim is indefinite.

Claim Rejections - 35 USC § 102

The following is a quotation of the appropriate paragraphs of 35 U.S.C. 102 that form the basis for the rejections under this section made in this Office action:

A person shall be entitled to a patent unless -

(b) the invention was patented or described in a printed publication in this or a foreign country or in public use or on sale in this country, more than one year prior to the date of application for patent in the United States.

Claims 1-2, 4-5, 10-11, 13-18, and 25-26 are rejected under 35 U.S.C. 102(b) as being anticipated by Underwood et al. (U.S. Pat. No. 6,277,112 B1).

Regarding claim 1, Underwood et al. disclose a method for treating an intervertebral disc comprising:

Independently advancing at least one optic fiber 324 into a nucleus of the disc through an access device 302 (col. 26, ln. 53-59, col. 26, ln. 63 – col. 27, ln. 8, and Figs. 16 and 17); and

Viewing an interior of the disc using at least one of the optic fibers (Figs. 17 and 18).

Regarding claim 2, Underwood et al. disclose the method of claim 1, further comprising advancing an access device into the disc to create a passageway into the disc with the access device (col. 27, In. 44-49).

Regarding claim 4, Underwood et al. disclose the method of claims 1 and 2, further comprising:

Advancing a treatment device 310 through the access device 302 (Fig. 16); and Activating the treatment device to treat the disc (col. 27, In. 64 – col. 28, In. 16 and Fig. 18).

Regarding claim 5, Underwood et al. disclose the method of claims 1, 2, and 4, wherein activating the treatment device occurs prior to viewing the interior of the disc (Fig. 18). Since the treatment device of Underwood et al. must first remove tissue from the interior of the disc in order for the optical fiber to be able to view the interior, the treatment device is inherently activated prior to viewing the interior of the disc.

Regarding claim 10, Underwood et al. disclose the method of claims 1, 2, and 4, wherein the treatment device includes at least one active electrode 357 and a return electrode 350, wherein activating the treatment device comprises applying a high frequency voltage between the active and return electrodes (col. 27, ln. 64-67 and Fig. 17).

Regarding claim 11, Underwood et al. disclose the method of claims 1-2, 4, and 10, further comprising using a conductive medium to form a current path between the active and return electrodes (col. 27, In. 40-42 and 53-58 and Fig. 17)

Regarding claim 13, Underwood et al. disclose the method of claims 1-2, 4, and 10-11, where the conductive medium is the naturally occurring fluid within the disc. The naturally occurring fluid is inherently present in the disc. Therefore, the conductive medium must inherently comprise at least the naturally occurring fluid.

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Regarding claim 14, Underwood et al. disclose the method of claims 1, 2, (and 4) wherein advancing the treatment device comprises advancing the treatment device into a nucleus pulposus of the disc (col. 27, In. 44-49).

Regarding claim 15, Underwood et al. disclose the method of claims 1, 2, and 4, wherein activating the treatment device comprises ablating tissue within the disc (col. 27, ln. 64-67 and Figs. 17 and 18).

Regarding claim 16, Underwood et al. disclose the method of claims 1-2, 4, and 15, further comprising observing the effect of the ablating of tissue using the optic fiber (col. 28, ln. 17-18).

Regarding claim 17, Underwood et al. disclose the method of claims 1-2, 4, and 15-16, wherein observing the effect comprises measuring a void created by the ablating of tissue (col. 28, ln. 22-23).

Regarding claim 18, Underwood et al. disclose the method of claims 1-2, 4, and 15-16, wherein observing the effect comprises observing an outer portion of the disc.

The device of Underwood et al. is inherently capable of observing an outer portion of the disc when observing the effect of ablation (Fig. 18).

Regarding claim 25, Underwood et al. disclose the method of claim 1, where advancing the at least one optic fiber into the nucleus of the disc via the access device is performed during an open surgical procedure (col. 3, ln. 27-33).

Regarding claim 26, Underwood et al. disclose the method of claim 1, where advancing the at least one optic fiber into the nucleus of the disc via the access device is performed during a percutaneous surgical procedure (col. 4, ln. 46-50).

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Claims 1-2, 4, 19-20, and 22-23 are rejected under 35 U.S.C. 102(b) as being anticipated by another embodiment of Underwood et al.

Regarding claim 1, in another embodiment Underwood et al. disclose a method for treating an intervertebral disc comprising:

Independently advancing at least one optic fiber 280 into a nucleus of the disc through an access device 278 (col. 24, ln. 12-35 and Fig. 13); and

Viewing an interior of the disc using at least one of the optic fibers (Figs. 13-15).

Regarding claim 2, in another embodiment Underwood et al. disclose the method of claim 1, further comprising advancing an access device into the disc to create a passageway into the disc with the access device (col. 24, In. 30-35).

Regarding claim 4, in another embodiment Underwood et al. disclose the method of claims 1 and 2, further comprising:

Advancing a treatment device 284 through the access device 278 (Figs. 13-15); and

Activating the treatment device to treat the disc (col. 25, ln. 35-38).

Regarding claim 19, in another embodiment Underwood et al. disclose the method of claims 1, 2, and 4, wherein activating the treatment device comprises coagulating tissue within the disc (col. 3, ln. 48-53). It is noted that causing tissue to shrink constitutes coagulating tissue as evidenced by claim 21.

Regarding claim 20, in another embodiment Underwood et al. disclose the method of claims 1-2, 4, and 19, further comprising observing the effect of the coagulating of tissue using the optic fiber (Fig. 14).

Regarding claim 22, in another embodiment Underwood et al. disclose the method of claims 1-2, 4, and 19-20, wherein observing the effect comprises observing an outer portion of the disc. The device of Underwood et al. is inherently capable of observing an outer portion of the disc when observing the effect (Fig. 15).

Regarding claim 23, in another embodiment Underwood et al. disclose the method of claims 1, 2, and 4, further comprising performing non-invasive imaging prior to or during activating the treatment device (col. 24, ln. 1-15).

Claim Rejections - 35 USC § 103

The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negatived by the manner in which the invention was made.

The factual inquiries set forth in *Graham* v. *John Deere Co.*, 383 U.S. 1, 148 USPQ 459 (1966), that are applied for establishing a background for determining obviousness under 35 U.S.C. 103(a) are summarized as follows:

- 1. Determining the scope and contents of the prior art.
- 2. Ascertaining the differences between the prior art and the claims at issue.
- 3. Resolving the level of ordinary skill in the pertinent art.
- 4. Considering objective evidence present in the application indicating obviousness or nonobviousness.

Claims 3, 7-8, and 21 are rejected under 35 U.S.C. 103(a) as being unpatentable over Underwood et al.

Regarding claim 3, Underwood et al. disclose the method of claims 1 and 2. The claim differs from Underwood et al. in calling for advancing the access device into the disc to comprise separating layers of a fibrous outer portion of the disc to create a passageway into the disc with the access device. Underwood et al., however, disclose another embodiment of their invention in which the access device 702 comprises a needle (as called for by the applicant on page 17, ¶ 70 of the specification) that advances into the disc to separate layers of a fibrous outer portion of the disc to create a passageway into the disc that causes less damage and is re-sealable. (col. 33, ln. 25-34, col. 33, ln. 45-55, and Figs. 34-36). Therefore, it would have been obvious to one of ordinary skill in the art at the time the invention was made to have the method of advancing the access device of Underwood et al. comprise separating layers of a fibrous outer portion of the disc to create a passageway into the disc with the access device in view of another embodiment of Underwood et al. to create a passageway that causes less damage and is re-sealable.

Regarding claim 7, Underwood et al. disclose the method of claims 1, 2, and 4. The claim differs from Underwood et al. in calling for advancing of the at least one optic fiber and viewing the interior of the disc to be performed intermittently through said method. In view of the method disclosed by Underwood et al., however, it would have been obvious to one of ordinary skill in the art at the time the invention was made to have intermittently advanced at least one optic fiber and viewed the interior of the disc because the user would obviously remove tissue and intermittently advance at least one optic fiber and view the interior of the disc to see how much tissue had been removed.

Regarding claim 8, Underwood et al. disclose the method of claims 1 and 2. The claim differs from Underwood et al. in calling for advancing the access device to comprise inserting a needle into at least a fibrous outer portion of the disc. Underwood et al., however, disclose another embodiment of their invention in which the access device 702 comprises a needle (as called for by the applicant on page 17, ¶ 70 of the specification) that is inserted into a fibrous outer portion of the disc to create a passageway into the disc that causes less damage and is re-sealable. (col. 33, ln. 25-34, col. 33, ln. 45-55, and Figs. 34-36). Therefore, it would have been obvious to one of ordinary skill in the art at the time the invention was made to have the method of advancing the access device of Underwood et al. comprise inserting a needle into at least a fibrous outer portion of the disc in view of another embodiment of Underwood et al. to create a passageway that causes less damage and is re-sealable.

Regarding claim 21, in another embodiment Underwood et al. disclose the method of claims 1-2, 4, and 19-20. The claim differs from another embodiment of Underwood et al. in calling for observing the effect to comprise measuring shrinkage of tissue resulting from the coagulation of tissue. In one embodiment Underwood et al., however, teach measuring a void created by the ablating of tissue (col. 28, ln. 22-23). Therefore, it would have been obvious to one of ordinary skill in the art at the time the invention was made to have the method of observing of Underwood et al. comprise measuring shrinkage of tissue resulting from the coagulation of tissue in view of one embodiment of Underwood et al. because it is obvious to use the same method to

measure a void to monitor treatment progress, whether the void is created by coagulation or ablation.

Response to Arguments

Applicant's arguments with respect to the pending claims have been fully considered but they are not persuasive.

Regarding independent claim 1, applicant argues that Underwood does not disclose independently advancing at least one optic fiber into a nucleus of the disc through an access device.

Underwood, however, clearly discloses a plurality of inner lumens (not shown) in catheter body 306 that individually deliver the electrosurgical treatment device 310, endoscope 316, and other tools 314, 318 (col. 26, ln. 53-59, col. 26, ln. 63 – col. 27, ln. 8, and Figs. 16 and 17). Since the optic fiber of the endoscope and the other tools are each separately advanced through a respective lumen, the optic fiber is inherently independently advanced with respect to the disc as argued.

In addition, Underwood discloses that electrosurgical treatment device 310 is independently advanced and retracted with respect to the optic fiber of the endoscope (col. 27, ln. 9-20 and Figs. 16-18). It should be noted that catheter body 306 is mistakenly labeled "310" in Fig. 18. This mistake is clear from Underwood's disclosure that: electrosurgical instrument 310 has a flexible shaft 312 (col. 26, ln. 67 – col. 27, ln. 1 and Figs. 16-17); and that support cannula/flexible shaft 312 extends through an

internal lumen 344 and beyond the distal end 346 of catheter body 306 (col. 27, ln. 30-31 and Figs. 16-17).

The examiner further maintains that the other embodiment of Underwood previously cited also continues to anticipate claim 1 as amended. With regards to the embodiment shown in Fig. 13, Underwood discloses that optic fiber of endoscope 280 is separately and independently advanced into a nucleus of the disc through an access device 278 (col. 24, ln. 12-17 and Fig. 13). Electrosurgical treatment device 284 is then separately and independently advanced into a nucleus of the disc through the access device 278 (col. 24, ln. 30-35 and Fig. 13).

Conclusion

Any inquiry concerning this communication or earlier communications from the examiner should be directed to Alex B. Toy whose telephone number is (571) 272-1953. The examiner can normally be reached on Monday through Friday, 8:00 AM to 4:30 PM.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Linda C.M. Dvorak can be reached on (571) 272-4764. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR.

Status information for unpublished applications is available through Private PAIR only.

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AT AT 11/21/06

MICHAEL PEFFLEY
PRIMARY EXAMINER